

PUBLIC VOUCHER FOR PURCHASES AND
SERVICES OTHER THAN PERSONAL

D. O. Vou. No. _____
Bu. Vou. No. 684

U. S. _____ COST REIMBURSABLE
(Department, bureau, or establishment)

Voucher prepared at _____
(Give place and date)

THE UNITED STATES, Dr., _____ Payee's Account No. _____

To _____
(Payee)

PAID BY
#19
SAPC/3753
COPY 1 OF 2

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary) Discount Terms	QUANTITY	UNIT PRICE		AMOUNT	
				Cost	Per	Dollars	Cts.
		Costs FOIAb3a					
		FOIAb3b					
Use continuation sheet(s) if necessary							

PAYMENT:
Complete ☐
Partial ☐
Final ☐

Shipped from _____ to _____ Weight _____ Government B/L No. _____ Total _____

I certify that the above bill is correct and just and that payment has not been received.

(Sign original only)

Date 2-28-57 *Payee _____
(Certificate not required when a like certificate is made by payee on attached bill or bills)

Per _____ Title _____

Contract No. A101 Date _____ Req. No. _____ Date _____ Invoice Rec'd. _____

Pursuant to authority vested in me, I certify that this account is correct and proper for payment.

† Approved for \$ _____

† _____
(Authorized Certifying Officer)

By _____

SIGN
ORIGINAL
ONLY

Title _____

Title _____

Date _____

THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

Paid by { Check No. _____ dated _____, 19____, for \$ _____ (on Treasurer of the United States in favor of payee named above.)
Cash, \$ _____, on _____, 19____ Payee _____
(Sign original only)

* When a voucher is signed or receipted in the name of a company or corporation, the name of the person writing the company or corporation, and, if warranted, the title of the person, must be shown. Example: "John Doe Company, per John Smith, Secretary", or "Treasurer", as the case may be.
† If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$ _____", and over his official title.

Title _____

METHOD OF OR ABSENCE OF ADVERTISING

METHOD OF ADVERTISING

1. Advertising in newspapers Yes ☐ No ☐.
2. (a) Advertising by circular letters sent to dealers.
(b) And by notices posted in public places Yes ☐ No ☐.

(If notices were not posted in addition to advertising by circular letters sent to dealers, explanation of such omission must be made below.)

ABSENCE OF ADVERTISING

3. Without advertising, under an exigency of the service which existed prior to the order and would not admit of the delay incident to advertising.
4. Without advertising in accordance with
5. Without advertising, it being impracticable to secure competition because of

.....
.....
.....
.....
.....
(Here state in detail the nature of the exigency or circumstances under which the securing of competition was impracticable under 3 and 4)

NOTE.—The above form "Method of or Absence of Advertising" is to be used when purchases are made or services secured under proper authority without written agreement in any form. In case of a written agreement (formal contract, proposal, and acceptance, or less formal agreement) Standard Form No. 1036—Revised should be used for abstracting the method of or absence of advertising and award of contract. (See General Regulations No. 51, as amended.)

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Bureau Voucher for Purchases and
Services Other Than Personal

MEMORANDUM

CONTINUATION SHEET

U. S. _____ COST REIMBURSABLE _____ Sheet No. 1 _____ of Bureau Voucher No. 684
(Department, bureau, or establishment)

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	QUAN- TITY	UNIT PRICE		AMOUNT	
				Cost	Per	Dollars	Cts.
FOIAb3a		Contract A101 - Costs applicable to all systems					
		Direct Costs Properly Chargeable to Contract A101 for the period 2/11/57 thru 2/24/57					
		Labor for the period February 11, 1957 thru February 24, 1957					FOIAb3a
		Overhead computed for Electronic Instrumentation Division at interim rate of [REDACTED]					
		Other Costs - sheets no. 2 and 3					
FOIAb3a		Total Labor, Overhead and Other Costs					
		G & A expense computed at interim rate of [REDACTED]					
		Total Costs					

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Services Other Than Personal

MEMORANDUM

CONTINUATION SHEET

U. S. COST REIMBURSABLE Sheet No. 2 of Bureau Voucher No. 684
(Department, bureau, or establishment)

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	QUAN- TITY	UNIT PRICE		AMOUNT	
				Cost	Per	Dollars	Cts.
CHECK NO.	P.O. NO.	PAYEE					
11035	27-37069	FOIAb3a					
11046	27-36856						
11047	27-37129						
11057	27-36918						
11058	27-37407						
11060	G-24769						
11060	G-24769				FOIAb3a		
11061	27-37039						
11079	27-37064						
11079	27-37064						
11085	27-37139						
11086	27-37349						
11086	27-37349						
11089	27-37317						
11093	27-37527						
11093	27-37469						
11079	27-37064						
11079	27-37064						
11096	27-37064						
11096	27-37064						
11097	27-37339						
11124	27-37077						
11124	27-37077						
11137	27-37068						
11139	27-36558						
11143	27-37472						
11156	27-37468						
11086	27-37348						
11142	27-37138						
11137	27-37068						
11144	27-37623						
11145	27-37506						
11196	27-37005						
11230	27-37470						
11262	27-37443						
11288	27-37302						
11289	27-37064						
11240	27-36614						
11280	27-36614						
11281	27-36614						
11231	27-37624						
11047	27-37292						
11058	27-37452						
11058	27-37387						
11059	27-37295						
11080	27-37263						

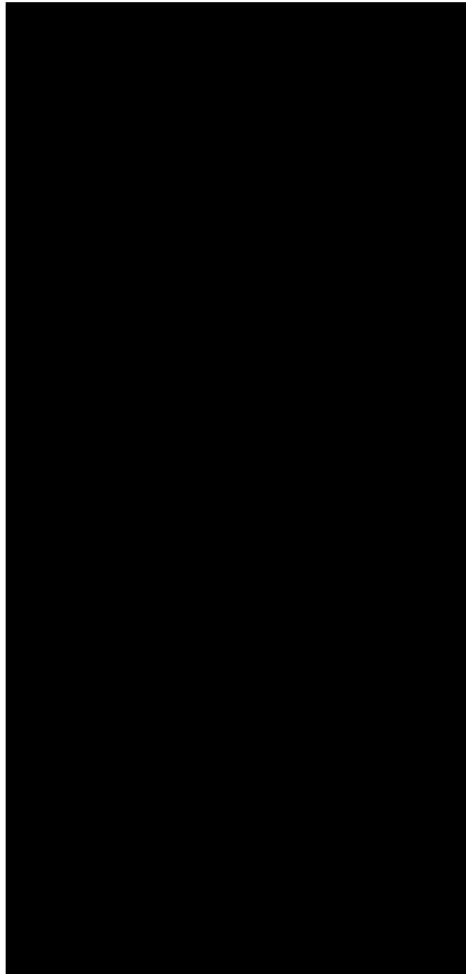

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Bureau Voucher For Purchases and
Services Other Than Personal

MEMORANDUM

CONTINUATION SHEET

U. S. _____ COST REIMBURSABLE _____ Sheet No. 3 of Bureau Voucher No. 604
(Department, bureau, or establishment)

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	QUAN- TITY	UNIT PRICE		AMOUNT	
				Cost	Per	Dollars	Cts.
CHECK NO.	P.O. NO.	PAYEE					
11081	27-37343						
11082	27-37378						
11084	27-37459						
11086	27-37294						
11087	27-37410						
11087	27-37288						
11090	27-37345						
11090	27-37345						
11103	27-37346						
11146	27-37263			FOIAb3a			
11147	27-37263						
11166	27-37479						
11167	27-37455						
11168	27-37461						
11283	27-37418						
11231	27-37467		FOIAb3a				
11231	27-34341						
11235	27-37446						
11238	27-37346						
11243	27-37200						
11263	27-37313						
11283	27-37418						
11286	27-15420						
11284	27-37943						
11286	27-37263						
11140	27-37134						
11180	27-37529						
11212	27-37529						
11234	27-37541						
11235	27-37446						
Total Page 2 and 3							